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APPLICATION NO.	FILING DATE		CIDCENIALOR				(Date)
10/758,288	01/16/2004	ſ	FIRST NAMED INVENTOR Mikihiro Yamashita			ATTORNEY DOCKET NO.	CONFIRMATION NO.
TITLE OF INVENTION: SWITCHING POWER SUPPLY DEVICE				mashita		Q79286	5150
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APPLN. TYPE	SMALL ENTITY	ISSUE FE	EE	PUBLICATION FEE		TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	00			\$1700	05/02/2006
, EXAMINER		ART UNIT		CLASS-SUBCLASS			
STERRETT,	2838 363-020000			00	•		
1. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.	Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
	RESIDENCE DATA TO B	F PRINTED ON TH		•	1.		
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.							
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Authorized Signature	JAMAN 3	Mondy	# 41,5	74 Da	ite <u> </u>	3-31-06	
Typed or printed name	Darryl Me	xic		Re	gistration No	23,063	
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